

**breakout ABSTRACT**

Abstract No. 20

TITLE**SYSTEMIC LUPUS ERYTHEMATOSUS (SLE): TRACKING A COMPLEX, MULTI-SYSTEMIC CHRONIC DISEASE****TRACK****Network Content****OBJECTIVES**

Learning objective: to understand the intended purpose, plan and outcome in the tracking of SLE and the various obstacles and concessions made in achieving a workable methodology, including limitations in interpretation and suggestions for the future.

SUMMARY

The purpose of this tracking project was to estimate prevalence and annual incidence rates of SLE for Boston, and to link measures of SLE occurrence in geographic subsets of Boston to available environmental databases. Hospital databases were the primary source for cases. Medical records (927) of patients coded for SLE during the 12 month surveillance period were to be reviewed and abstracted by contracted rheumatologists for ACR documentation and dates of diagnoses. The complexities of both the disease and the standard criteria available, together with the limited availability of rheumatologist abstractors necessitated major revision of methodology. These problems, along with modifications of the SLE surveillance and the environmental databases, will be discussed.

Results, analysis and limitations of our estimates of prevalence and annual incidence for Boston will also be presented. Of the medical records reviewed, there were over 200 with definite or probable SLE and a diagnosis between 1999 through 2004. These cases were geocoded, and mapped by density of cases in block groups. Using 2000 Census data for denominators, comparison "SLE rates" were generated and mapped for block groups, controlling for age and race. For the same block groups, overlay maps displaying density of state hazardous waste sites by type were prepared. Limitations in interpretation of this linking will be discussed. Need for more objective, standardized, and efficiently accessible measures of autoimmune dysfunction will be discussed.

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